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UTILITY PATENT APPLICATION TRANSMITTAL

Address to: Box PATENT APPLICATION				TION	Attorney Dock	et No.	LAIS3011/EM			
Commissioner of Patents					First Named In (or identifier)	ventor	Shang-Hong LAI	0		
P.O. Box 1450 Alexandria, VA 22313-1450				450	Total Pages		136	s. PT		
Transmitted herewith is a patent application under 37 CFR 1.53(b)								200		
Entitled: Statistical Facial Feature Ex								22141		
Ø	1.	Submitted herewith are the following: 23 pages of specification, including claims and Abstract. 10 sheets of FORMAL drawings (Figs. 1-10). 16 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Information Disclosure Statement. 1 page of Form PTO-1449, and one copy of each document listed thereon. 1 Assignment of the invention to Industrial Technology Research Institute, Chutung, Hsinchu, Taiwan, R.O.C., Cover Sheet, and payment of the \$40 recordal fee. 1 certified copy of Taiwan application no. 092109928. Priority is claimed. 1 check in the amount of \$810 (\$770-Filing Fee; \$40-Assignment Recordation Fee).								
□ ⊠	2. 3.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.								
	4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed								
	5.	Insert before the first sentence of the specification: This application is a Continuation-in-part								
	6.	of nonprovisional application number filed Other:								
Reg.	No. 25	5,893; Richa	ard E. f	epresenting applicant Fichter, Reg. No. 26,3 2; and Benjamin E. U	382; Thomas	J. Moore, R	, Reg. No. 19,179; Euç eg. No. 28,974; Josep	gene Mar, h		
		THE F	ILING FE	EE IS CALCULATED AS FO	DLLOWS:		Basic Fee:	\$770.00		
	7	Total Claims:	16	- 20 =		0	X \$18 =	\$0.00		
	Indepen	dent Claims:	1	- 3=		0	X \$86 =	\$0.00		
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176					-		Multiple Dependent Claim (add \$290.00): Subtotal: 50% Reduction if Small Entity Status:			
Phone: 703-683-0500 Fax			Fax: 70	03-683-1080	Total:		\$770.00			
Date:		Name:		Signature:		Reg. No.				
November 25, 2003		Eugene Mar					25,893			